FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State & DIVISION OF CORPORATIONS

DOCUMENT #

P97000021201 (3)

UGALAND, INC.

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						+ 1001(50) 110 (51)) 100() SS() SS() SS() SS() SS() NSS() NSS() NSS() SS()		
	IVERCHASE DRIVE		EST RIVERCHASE					
TEMPLE TERR	RACÉ FL 33637	TEMPL	TEMPLE TERRACE FL 33637				DO NOT WRITE IN THIS SPACE	
							Date Incorporated or Qualified	
		1 - 64.00					03/03/1997	
<u></u>			2a, Mailing Address				4. FEI Number Applied For Not Applicable	
Suite, Apt.	#. etc.	26 Suite	Suite, Apt. #, etc.				SR 75 Additional	
22		27	27				5. Certificate of Status Desired Fee Required	
City & State City & State			& State)			. 6. Election Campaign Financing \$5.00 May Be	
28			Zip Country				Trust Fund Contribution	
Zip	Country	Zip		\vdash	ınıry	•	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	9. Name and Address of Curre	29 ent Registered	Agent	30	Ι		Personal Property Tax due June 30. Li Yes Li No 10. Name and Address of New Registered Agent	
00	UNTEBI, FEHINTOLA				81	Name		
110 NORTH ARMENIA AVENUE					82	Stroot Add	dress (P.O. Box Number is Not Acceptable)	
TAMPA FL/33609						Siloet Addi	areas (1.12. Dox trumber is true noceptable)	
					83			
	4				84	City	FL 85 Zip Code	
11. Pursuant t	to the provisions of Sections 607.05	502 and 607.15	08, Florida Statut	es, the a	bove	l e-named corp	poration submits this statement for the purpose of changing its registered	
office or re	egistered agent, or both, in the State m familiar with, and accept the obli	te of Florida. Su igations of, Sec	ich change was a tion 607.0505, Fil	authorize orida Stat	d by lules	y the corporat s.	ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE		y						
	Signature, typed or printed name of registered a				d Age	ent signature requi	APPLITAGACIONANCES TO OFFICERS AND DIRECTORS IN 12	
12.	D OFFICENS A	ND DIRECTOR	DELETE	13.	T1 F	_	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME	NWOYE, CHRISTIAN			1.2 N				
STREET ADDRESS	THE CHIEF PRESCRIAGE SOUR					ADDRESS	•	
CITY-ST-ZIP	TEMPLE TERRACE FL 3363			1.4 CI	ITY-S	ST - ZIP		
TITLE			DELETE	2.1 11	TLE		Change Addition	
NAME				2.2 N	2.2 NAME 2.3 STREET ADDRESS			
STREET ADDRESS								
CITY-ST-ZIP)		DELETE	2. 4 CITY - ST - ZIP		ST-ZIP	Change Addition	
TITLE				3.1 TITLE 3.2 NAME 2		_	Change Modition	
NAME	•							
STREET ADDRESS	1			3.3 STREET ADDRESS 3.4. CITY - S1 - ZIP				
CITY-ST-ZIP TITLE				4.1 TI		01-411	☐ Change ☐ Addition	
NAME				4.21				
STREET ADDRESS				4.3 S	TREET	ADDRESS		
CITY-ST-ZIP				4.4 C	ITY-S	ST - ZIP		
TITLE			DELETE	5.1 T)	TLE		Change Addition	
NAME				5.2 N				
STREET ADDRESS				5.3 \$	TREET	ADDRESS		
CITY - ST - ZIP			DESTE			ST - ZIP	Change Addition	
TITLE			DELETE	6.1 Ti			7000025090	
NAME				62 N		i i	7000025090\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
STREET ADDRESS						ADDRESS	***150.00	
CITY-ST-ZIP	certify that the information supplied	with this filing	does not qualify f			SI-ZIP otion stated in	n Section 119.07(3)(i), Florida Statutes. I further certify that the information	

Indicated on this annual report or supplied with this limits does not quality to the exemption stated in Section 1.19.07(3)(i). Florida Statutes, I furner certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

ALLONG CON A. ALMANE 3/21/98